PTO/SB/06 (07-06)

Approved for use through 1/31/2007. OMB 0651-0032

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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/579,097			ing Date 18/2007	To be Mailed
APPLICATION AS FILED – PART I (Column 1) (Column 2)							SMALL ENTITY				HER THAN
Н	FOR		NUMBER FILED		NUMBER EXTRA		RATE (\$)	FEE (\$)	OR	RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	\neg	N/A	LD NO.	N/A		N/A	1 LL (0)	i	N/A	TLE (0)
	SEARCH FEE		N/A		N/A		N/A		1	N/A	
	(37 CFR 1.16(k), (j), (EXAMINATION FE (37 CFR 1.16(o), (p), (E	N/A		N/A		N/A		1	N/A	
	TAL CLAIMS CFR 1.16(i)	or (q))	minus 20 =				x \$ =		OR	x s =	
INE	EPENDENT CLAIM CFR 1,16(h))	s	minus 3 =				x \$ =		1	x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE shee is \$2 addit	ts of pap 50 (\$125 ional 50 :	etion and drawing er, the application for small entity) sheets or fraction a)(1)(G) and 37	n size fee due for each n thereof. See						
	MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))								1		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2.]	TOTAL	
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3) SMAL								L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	02/17/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	· 19	Minus	 20	= 0		x \$ =		OR	X \$52=	0
	Independent (37 CFR 1.16(h))	• 5	Minus	 5	= 0		x \$ =		OR	X \$220=	0
	Application Size Fee (37 CFR 1.16(s))										
_	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
		(Column 1)		(Column 2)	(Column 3)						
L	08/20/2009	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
Ä	Total (37 CFR 1,16(i))	· 19	Minus	** 20	= 0		x \$ =		OR	X \$52 =	0
AMENDMENT	Independent (37 CFR 1.16(h))	* 5	Minus	 5	= 0		x \$ =		OR	X \$220 =	0
Ä	Application Size Fee (37 CFR 1.16(s))]]		
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						-	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3". The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.											

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